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## APPLICANTS

Paulette Bernetta Turner, Savannah, GABON;

## \*\* CONTINUING DATA \*\*\*\*\*

None  
PML

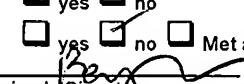
## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

None  
PML

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/02/2003

## \*\* SMALL ENTITY \*\*

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	GABON	3	7	4
Verified and Acknowledged		Initials			

## ADDRESS

Paulette Bernetta Turner  
2115 S. Fernwood Drive  
Savannah , GA  
31404

## TITLE

Personal voice: emergency message, alarm responder watch

FILING FEE RECEIVED 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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